

APPLICATION DATA SHEET

Application Type::	Regular
Subject Matter::	Utility
Title::	BROADBAND TELECOMMUNICATIONS SYSTEM
Attorney Docket Number::	1111B
Request for Non-Publication?::	Yes
Suggested Drawing Figure::	FIG. 1
Total Drawing Sheets::	16

Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship	
Country::	USA
Status::	DECEASED
Given Name::	JOSEPH
Middle Name::	MICHAEL
Family Name::	CHRISTIE

Applicant Authority Type::	Inventor
Primary Citizenship	
Country::	USA
Given Name::	ALBERT
Middle Name::	DANIEL
Family Name::	DUREE
City of Residence::	INDEPENDENCE
State or Providence of Residence::	MO
Country of Residence::	USA
Street of mailing address::	16913 COGAN ROAD
City of mailing address::	INDEPENDENCE
State or Province of mailing address::	MO
Country of mailing address::	USA

Postal or Zip Code of mailing address::	64055
Applicant Authority Type::	Inventor
Primary Citizenship	
Country::	USA
Given Name::	MICHAEL
Middle Name::	JOSEPH
Family Name::	GARDNER
City of Residence::	OVERLAND PARK
State or Providence of Residence::	KS
Country of Residence::	USA
Street of mailing address::	5307 WEST 100TH STREET
City of mailing address::	OVERLAND PARK
State or Province of mailing address::	KS
Country of mailing address::	USA
Postal or Zip Code of mailing address::	66207

Applicant Authority Type::	Inventor
Primary Citizenship	
Country::	USA
Given Name::	WILLIAM
Middle Name::	LYLE
Family Name::	WILEY
City of Residence::	OLATHE
State or Providence of Residence::	KS
Country of Residence::	USA
Street of mailing address::	814 NORTH MESA STREET
City of mailing address::	OLATHE
State or Province of mailing address::	KS
Country of mailing address::	USA
Postal or Zip Code of mailing address::	66061

Applicant Authority Type:: Inventor
 Primary Citizenship
 Country:: USA
 Given Name:: MANU
 Middle Name:: CHAND
 Family Name:: BAHL
 City of Residence:: HILLSBOROUGH
 State or Providence of Residence:: CA
 Country of Residence:: USA
 Street of mailing address:: 80 BATES ROAD
 City of mailing address:: HILLSBOROUGH
 State or Province of mailing address:: CA
 Country of mailing address:: USA
 Postal or Zip Code of mailing address:: 94010

Correspondence Information

Correspondence Customer
 Number:: 28004
 Phone number:: (303) 938-9999 EXT. 13
 Fax Number:: (303) 938-9995
 E-Mail address:: MSETTER@DSOBLAW.COM

Representative Information

Representative Customer Number::	28004
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Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
THIS APPLICATION	Continuation of	09/497,719	02/04/00
09/497,719	Continuation of	08/594,660	02/02/96

08/594,660	Continuation-in-part	08/525,897	09/08/95
08/525,897	Continuation-in-part	08/238,605	05/05/94

Assignee Information

Assignee name::

SPRINT COMMUNICATIONS
COMPANY, L. P.